## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number 1027.002 USO1

CLAIMS AS FILED - PART I  (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			29		(Goldini Z)			RATE	FEE	OR I	RATE	FEE	•
			<u> </u>		NUMBER SYTEM			BASIC FEE			BASIC FEE		ł
FOR			NUMBER FILED		NUMBER EXTRA		•	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			∑4 minus 20=		• 9			X\$ 9=	81.00	OR	X\$18=		
INDEPENDENT CLAIMS			4 mi	nus 3 =	. 1			X40=	40.00	OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT		•			+135=		OR	+270=		
* If	the difference	.1	TOTAL	496.00	OR	TOTAL							
•	- C	LAIMS AS A	MENDED		OTHER THAN					1			
5	CLAIMS AS AMENDED - PART II  5 25 06 (Column 1) (Column 2) (Column							SMALL	ENTITY	OR	SMALL		j
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· <i>3</i> 8	Minus	2	9	= /		X\$ 9=		OR	X\$18=		
	independent	· H	Minus	4	<u>C</u>		4 .	X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+270=		
•										OR	TOTAL ADDIT. FEE		2
			ADDIT. FEE		,	ADDII. FEE		1≥					
AMENDMENT B		(Column 1) CLAIMS REMAINING		(Colu		(Column 3	ור		ADDI-	1	•	ADDI-	Ì≧
		AFTER AMENDMENT		PREVI	OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	AVAILABLE
	Total	•	Minus	••		=	1	X\$ 9=		OR	X\$18=		ĬĤ
	Independent	•	Minus	***		=		X40=		OR	X80=		1
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On		·	
								+135=		OR	+270=		]-≍
			•			•		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		1
		(Column 1)			mn 2)	(Column 3	)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	• .	Minus	••		=		X\$ 9=		OR	X\$18=		1
ME	Independent	•	Minus	,***		=		X40=			X80=	<b> </b>	1
Ľ	FIRST PRESE	ل			OR	<u> </u>		1					
											+270=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													1
"		mber Previously Pa nber Previously Pa							propriate bo	x in co	olumn 1.		